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PTO/SSOS (DB-01)
Approved for use Origina 7/31/2006, CHIB (DB-1002)
LS. Patent and Tradapart (Other U.S. (DEPARTMENT OF ACCUSED

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTD-875								Application or Docket Mumber		
CLAIMS AS FILED - P (Cotumn 1)			ART I (Cotumn 2)		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
FOR MUNISER FILED BASIC FEE		MUMBER EXTRA]	RATE	FEE		RATE	REE	
C7 CFR 1.16(h))							-	OR		,
(37 CFR 1,14(4) minus 20 :			·		x 6		OR.			
INDEPENDENT CLAMS (37 OFR 1.18(b)) misus 3 =					X 5 .		OR			
MULTIPLE DEPENDENT CLAIM PRESENT (57 CFR 1,18(0))				1	+1*		OR.			
* if the difference in column 1 is less than zern, enter "O" in column 2.						TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II										
7/2/103	(Cetumn 1)		(Cotumn 2)	(Column 3)		SMALL 8	MITTY	OR .	OTHER SMALL	
Total (profit tuto)	REMAINING AFTER AMENDMENT		HIGHEST HUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RAYE	APOS TONAL FEE
Constructed	:20	Minus	20			x s=		OR	**	/
E Independent (III (IF CFR 1.16(II))	. 8	Minus	S	:3		x s	200.	A OR	X	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (87 CFR 1.18(0))						•:	00	OR		
11/1/02						TOTAL ADDI FEE	1	OR	TOTAL ADD'L FEE	
	(Cohumn 1) - CLAIMS		(Column 2) HIGHEST	(Cotumn 3)	7 1		·	1		
OD LL US Total of Or Or Lines US Of CR Lines US OF	REMAINING AFTER AMBYDMENT		MUMBER PREVIOUSLY PAID FOR	PRESENT . EXTRA	N	RATE	ADD+		RATE	ADDI- TIONAL FEE
Co con Lines	· [7]	Minus	: D			,		OR	X 8 _ =	
D (P CPR LIADE)	8,	Minus	-	. /	П			OR .	×. 1.	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (ST CFR 1.10(d))								\ oR	., \	
WIZUOG (Cotumn 1) (Cotumn 2) (Cotumn 3)										
414106	(Column 1)	_	(Cotumn 2) HIGHEST	(Column 3)						
SNT	REMAINING AFTER AMERIONENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE
O CO CORR LUEGO	15	Minus	⁻ 26	e		X 8=		OR	x •	
W Total (2 Cast ratio)	· 5	Minus	- 8	•		x 8e		OR	× ٤ •	
FIRST PRESENTATION OF MATURE DEPENDENT CLAIM (17 CFR 1.1E(d)						+8=		OR	+ 8=	
						ADOL FEE		OR	ADDL FEE	
If the entiry in column 1 is tess than the entry in column 2, write "O' in column 3. If the "Highest Number Previously Paid For" ON THIS SPACE is tess than 20, enter "20". If the "Highest Number Previously Paid For" (IN THIS SPACE is tess than 3, enter "2". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

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This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary departing upon the individual case. Any comments on the amount of time you require to complete this form another suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Peterd and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Paturia, P.O. Box 1450, Alexandria, VA 22313-1450.

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